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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| Notice of Allowability                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Application No.                                                                 | Applicant(s)                                                                                                                          |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 09/780,113                                                                      | TYRRELL ET AL.                                                                                                                        |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Examiner                                                                        | Art Unit                                                                                                                              |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Carla Myers                                                                     | 1634                                                                                                                                  |                          |
| The MAILING DATE of this communication apper<br>All claims being allowable, PROSECUTION ON THE MERITS IS<br>herewith (or previously mailed), a Notice of Allowance (PTOL-85)<br>NOTICE OF ALLOWABILITY IS NOT A GRANT OF PATENT RI<br>of the Office or upon petition by the applicant. See 37 CFR 1.313                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | (OR REMAINS) CLOSED i<br>or other appropriate comm<br>GHTS. This application is | n this application. If not included unication will be mailed in due cou                                                               | ırse. <b>THIS</b>        |
| <ol> <li>This communication is responsive to the amendment filed.</li> <li>The allowed claim(s) is/are 13,39 and 40.</li> <li>The drawings filed on are accepted by the Examine</li> <li>Acknowledgment is made of a claim for foreign priority und a) All Some* C) None of the:</li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | r.                                                                              | or (f).                                                                                                                               |                          |
| <ol> <li>Certified copies of the priority documents have been received.</li> </ol>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                 |                                                                                                                                       |                          |
| 2. Certified copies of the priority documents have been received in Application No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                 |                                                                                                                                       |                          |
| 3. Copies of the certified copies of the priority doc<br>International Bureau (PCT Rule 17.2(a)).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | cuments have been receive                                                       | d in this national stage application                                                                                                  | from the                 |
| * Certified copies not received:  5. Make a valid demant in made of a claim for demantic priority under 35 U.S.C. \$ 110(a) (to a province of province of a claim for demantic priority under 35 U.S.C. \$ 110(a) (to a province of province of a claim for demantic priority under 35 U.S.C. \$ 110(a) (to a province of priority under 35 U.S.C. \$ 110(a) (to a province of priority under 35 U.S.C. \$ 110(a) (to a province of priority under 35 U.S.C. \$ 110(a) (to a province of priority under 35 U.S.C. \$ 110(a) (to a province of priority under 35 U.S.C. \$ 110(a) (to a province of priority under 35 U.S.C. \$ 110(a) (to a province of priority under 35 U.S.C. \$ 110(a) (to a province of priority under 35 U.S.C. \$ 110(a) (to a province of priority under 35 U.S.C. \$ 110(a) (to a province of priority under 35 U.S.C. \$ 110(a) (to a priority under 35 U. |                                                                                 |                                                                                                                                       |                          |
| 5. Acknowledgment is made of a claim for domestic priority under 35 U.S.C. § 119(e) (to a provisional application).  (a) The translation of the foreign language provisional application has been received.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                 |                                                                                                                                       |                          |
| 6. Acknowledgment is made of a claim for domestic priority under 35 U.S.C. §§ 120 and/or 121.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                 |                                                                                                                                       |                          |
| o. M Acknowledgment is made of a claim for domestic priority di                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ide: 33 0.3.0. 33 120 and/                                                      | UI 121.                                                                                                                               |                          |
| Applicant has THREE MONTHS FROM THE "MAILING DATE" of below. Failure to timely comply will result in ABANDONMENT of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | this communication to file at this application. THIS THE                        | a reply complying with the requirer<br>REE-MONTH PERIOD IS NOT EX                                                                     | nents noted<br>TENDABLE. |
| 7. A SUBSTITUTE OATH OR DECLARATION must be subm INFORMAL PATENT APPLICATION (PTO-152) which gives reason                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                 |                                                                                                                                       | TICE OF                  |
| <ul> <li>8. ☐ CORRECTED DRAWINGS must be submitted.</li> <li>(a) ☐ including changes required by the Notice of Draftspers</li> <li>1) ☐ hereto or 2) ☐ to Paper No</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | son's Patent Drawing Revie                                                      | w ( PTO-948) attached                                                                                                                 |                          |
| (b) including changes required by the proposed drawing correction filed, which has been approved by the Examiner.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                 |                                                                                                                                       |                          |
| (c) 🔲 including changes required by the attached Examiner's Amendment / Comment or in the Office action of Paper No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                 |                                                                                                                                       |                          |
| Identifying indicia such as the application number (see 37 CFR 1. each sheet.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 84(c)) should be written on t                                                   | he drawings in the front (not the bad                                                                                                 | ck) of                   |
| 9. DEPOSIT OF and/or INFORMATION about the deposit attached Examiner's comment regarding REQUIREMENT FOR TI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                 |                                                                                                                                       | e the                    |
| Attachment(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                 |                                                                                                                                       |                          |
| <ul> <li>1 Notice of References Cited (PTO-892)</li> <li>3 Notice of Draftperson's Patent Drawing Review (PTO-948)</li> <li>5 Information Disclosure Statements (PTO-1449), Paper No.</li> <li>7 Examiner's Comment Regarding Requirement for Deposit of Biological Material</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 4∐ Intervier 6∐ Examin                                                          | of Informal Patent Application (PTC<br>w Summary (PTO-413), Paper No.<br>er's Amendment/Comment<br>er's Statement of Reasons for Allo | •                        |
| CARLA J. MYERS PRIMARY EXAMINER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                 |                                                                                                                                       |                          |